

## **Global Exchange Network for Reproductive Health Morocco Virtual Conference Final Report**

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**The Global Exchange Network for Reproductive  
Health: Morocco Virtual Conference**

**“Safe Motherhood- The Moroccan Experience”**

**Report by:**

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Management Sciences for Health  
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## ACRONYMS AND ABBREVIATIONS

AAR	After Action Review
ARC	American Refugee Committee
GEN	Global Exchange Network for Reproductive Health
M&L	Management and Leadership Program
MSH	Management Sciences for Health
MOH	Ministry of Health
MSF	Médecins sans Frontières
NGO	Non-Governmental Organization
SONU	Emergency Obstetric and Neonatal Care
USAID	United States Agency for International Development
WHO	World Health Organization

## **1.0 Background**

At the request of USAID Washington, Management Sciences for Health's (MSH) Management and Leadership (M&L) Program developed the Global Exchange Network (GEN) for Reproductive Health. GEN is a virtual network designed to foster and sustain virtual exchange and sharing among reproductive health decision makers, policy-makers and service providers in countries no longer receiving USAID reproductive health and population funding. At the end of years of support USAID continues to be interested in supporting an exchange of information between "graduated countries" and USAID. GEN activities frequently include professionals from reproductive health organizations from other countries as well.

Morocco is one of the countries no longer receiving population support from USAID. In 2004, M&L began to work with the Moroccan Ministry of Health (MOH) to encourage Morocco's participation in the GEN Network in order to share its many important experiences in reproductive health and family planning that the country. The Moroccan MOH also operates the regional bureau of Partners in Population and Development and was actively strengthening its capacity to provide south to south technical exchange and disseminate its experience and expertise. MSH met with the MOH in April 2004 to explore ways of creating south to south information exchanges in the context of the GEN network. Based on these discussions and support from USAID Morocco and USAID M&L funds, the MOH and MSH formed a partnership to deliver an international virtual conference on Safe Motherhood.

## **2.0 Virtual Conference Objectives**

The conference objectives were:

- Stimulate interest in improving safe motherhood in French speaking African countries
- Transfer the MOH's knowledge and skills in the area of safe motherhood and their capacity to provide effective technical assistance in this area to countries of French speaking Africa.
- Provide technical resources and an opportunity for learning about the Moroccan Safe Motherhood Program.
- Create opportunities for exchange of ideas between and among health professionals from French speaking Africa and the Moroccan MOH.
- Develop an effective mechanism for acquiring and sharing the technical expertise and experience among health professionals of French speaking Africa as well as Moroccan health professionals that the MOH can use in the future.

## **3.0 Methodology**

The virtual conference, accessible over the Internet, took place over a three day period. There were a total of seven presentations on a virtual conference platform; two or three presentations per day (please see Annex 1 for conference agenda). Presentations varied

between 15 and 30 minutes. An asynchronous discussion followed each of the presentation. Participants found time to use the on-line synchronous quick meeting function to hold extended real time conversations during the conference.

MSH customized a virtual conference provided by a sub-contractor with expertise in virtual conferences (ICohere). The conference platform was accessible throughout the conference and through the end of September 2005.

#### 4.0 Content

The content on Safe Motherhood for the program was developed by the MOH. There were seven presentations:

Day	Presenter	Presentation title
Day 1	Dr. Rachid Beza	“The Moroccan experience in improving safe motherhood”
	Dr. Noureddine Fikri Benbrahim	“The epidemiology of maternal and neonatal morbidity and mortality in developing countries”
	Dr. Mostafa Tyane and Dr. A. Zerrari	“Strategy and programs for reducing maternal and neonatal mortality”
Day 2	Dr. Rachid Beza	“Obstetrical and Neonatal Emergency Care: the concept of the three delays, quality of care, and training in obstetrical emergencies”
	Dr. Ali Bensalah	“Monitoring obstetrical and neonatal care”
Day 3	Dr. Mohamed Abou-ouakil and M. Maadi	“Information, Education and Communication, Advocacy and Leadership in Safe Motherhood”
	Dr. Najia Hajji	“Safe Motherhood- ethics, rights, and the status of women”
	Dr. Mohamed Lardi	“Leadership and Safe Motherhood”

Participants had access to many excellent materials developed in Morocco for the Safe Motherhood program including materials from the National Conference of June 2002 on Safe Motherhood, the evaluation of the Safe Motherhood Program, the SONU (Emergency Obstetric and Neonatal Care) manual, and the manual for “Clinic Support.”

#### 5.0 Conference Results

Ninety eight (98) participants from eleven countries participated in the conference. Participating countries were Morocco, USA, Switzerland, Guinea, Burkina Faso, Ivory Coast, Mali, Benin, Mauritius, Cameroon, and Senegal. (Please see Annex 2 for more information).

A total of thirty participants completed the end of conference on-line evaluation for a response rate of about 20%. Overall, the completed evaluations were very positive with

92% of respondents indicating that their experience was excellent, very good or good. 84% reported the quality of the presentations was excellent and that the web environment for the virtual conference was excellent or very good. 90% of respondents rated their satisfaction with the organization of the conference excellent or very good, and when asked if they would participate in other similar virtual conferences 88% responded “absolutely.”

The following table summarizes respondent evaluation of key conference components:

	Very Satisfied	Satisfied	Neutral	Unsatisfied	Very Unsatisfied	No Opinion
On-line discussion	17%	47%	13%	13%	3%	
Presentations Text/Visual	47%	37%	13%	3%		
Presentations Audio Component	32%	48%	8%			12%
Library Resources	46%	27%	15%	8%		4%
Help/Technical Support	33%	25%	29%			13%
Participant Contributions	15%	54%	23%	4%		4%

Respondents were also asked a series of open-ended questions and their responses provide a picture of their overall conference experience. The following section summarizes the themes that emerged from these responses and reports a sampling of some of the most interesting respondent observations.

### ***Convenience and Access***

Many participants cited the fact that the virtual conference allowed them to participate fully without the associated travel costs of most conferences. They liked the fact that they could participate from computers at their desk, homes and in other locales. They also liked the fact that they could participate fully while continuing to work. Many cited the easy accessibility and usefulness of the conference materials, and that, because conference presentations and on-line discussions were available to them around the clock, they “wouldn’t miss a session because they could listen to the recorded presentations at any time or even more than once.”

“I work in a facility situated very far from any faculty and very far from any city where conferences are usually held. [*With the virtual conference*] I was able to work all day on location and also watch the presentations and review the discussions.” -Conference participant

### ***On-line discussions***

Although some respondents indicated disappointment with the asynchronous discussions following the presentations, others expressed enthusiasm for the “Reunions rapides” (Quick Meetings in real time):

“I particularly appreciated the interaction in real time.” -Conference participant

### ***Suggestions for future conferences***

Respondents generated a list of themes for future virtual conferences. These included:

- Female Genital mutilation
- Breast cancer screening
- Family planning
- Malaria in the community context
- Policies concerning maternal and neonatal mortality
- Decentralization and decision making

### ***South-to-South exchange***

One of the principal objectives of the virtual conference was to create opportunities for exchange of ideas between and among health professionals from French speaking Africa and the Moroccan MOH. Several respondents commented on the usefulness and nature of this south to south collaboration.

“The exchange of information in this conference and the Moroccan experience covered in the conference gave an opportunity to our whole team to get together and discuss our own situation: - that which we are doing and that which remains to be done. The conference helped our whole team at ARC (American Refugee Committee) diagnose our situation in Guinea.” -Conference participant

### ***Exchange at all levels***

This conference permitted participants to exchange ideas with people from many different perspectives and levels.

“The conference allowed us a view of the opinions of many people interested in the problem at the university level, at the governmental level, and from bilateral organizations like WHO and MSF.”

In summary, the conference met its most important goals of introducing a new way to exchange information and collaborate between francophone countries, disseminating key information from the Moroccan experience in safe motherhood to a francophone audience, and providing Morocco with the skills and tools to organize and host future virtual conferences.

## **Annex 1**

### **PROGRAMME DE LA CONFERENCE**

#### **JOURNEE 1 : Le 21 Juin 2005**

*« Maternité Sans Risque et l'expérience du Maroc »  
Présentation introductive de la conférence*

**Professeur Rachid Bezad**  
**Directeur du Centre national de Santé de Reproduction**  
**du Centre Hospitalo-Universitaire**  
**Rabat, Maroc**

*« Epidémiologie de la mortalité et morbidité maternelle  
et néonatale dans le monde et dans les pays en voie de développement. »*

**Dr. Nouredine Fikri Benbrahim**  
**Directeur de L'institut National d'Administration Sanitaire (INAS)**

*« Stratégie et programme de réduction de la mortalité maternelle  
et néonatale »*

**Dr. Mostafa Tyane \* / Dr. A. Zerrari \*\***  
**\* Directeur de la direction de la population**  
**Ministère de la santé du Maroc**  
**\*\* Chef de la Division de la Santé Maternelle et Infantile -**  
**Direction de la Population**

#### **JOURNEE 2 : Le 22 Juin 2005**

*« Soins obstétricaux et néonataux d'urgence :  
concept des 3 délais, qualité des soins, audit obstétrical et formation »*

**Professeur Rachid Bezad**  
**Directeur du Centre national de Santé de Reproduction**  
**du Centre Hospitalo-Universitaire Rabat Maroc**

*« Monitoring des soins obstétricaux et néonataux d'urgence : Bilan 2000-2004 et perspectives »*

**Dr. Ali Bensalah**  
**Chef de Service de la Protection de la Santé de la Mère**

#### **JOURNEE 3 : Le 23 Juin 2005**

*« Information Education et Communication, plaidoyer  
et leadership et maternité sans risque »*

**Dr. Mohamed Abou-ouakil \* / Mr. Mohamed Maadi \*\***  
**\* Chef de la Division de l'Information, Éducation et Communication**  
**\*\* Chef de service de la conception et de la communication**  
**Ministère de la santé du Maroc**  
*« Maternité sans risque :  
éthique, droit, statut de la femme »*



**Dr. Najia Hajji**  
**Consultant international en santé publique**

*« Leadership et Maternité Sans Risque »*  
**Dr. Mohamed Lardi**  
**Consultant international en santé publique**

**Annex 2:**

Participation by country

Morocco Virtual Conference June 2005

<b>Country</b>	<b>Number of Participants</b>	
Benin	1	
Burkina Faso	4	
Guinea	14	14%
Cameroun	2	
Cote d'Ivoire	2	
Mali	2	
Morocco	49	49%
Mauritania	1	
Senegal	2	
Country of origin not clear	2	
Switzerland	3	
USA (not including conference organizers)	2	
Non-MSH	7	
MSH	9	4%
<b><i>Total</i></b>	<b>98</b>	



### **Annex 3:**

Selected Points from After Action Review

Morocco MOH and MSH Teams

29 June 2005

Positive points noted during the conference

- Excellent teamwork across the Atlantic.
- Excellent planning and organization of work and very successful “management of deadlines” (“Le planning et l’organisation de travail étaient excellents et l’équipe a respecté tous leurs « deadlines ».”)
- The conference content was well adapted to the needs of the participants.
- There was very good definition of the roles and responsibilities for each conference development team.
- The ICohere platform was very stable and easy to use and provided an excellent example of how this technology could be used in Morocco in the future.
- Participation of around 100 participants, divided equally between Moroccans and others, was adequate. There were two groups from Marakech et Berkane that participated in the conference as teams.
- The presenters were motivated and did a good job.
- Technical support was excellent.
- In general, the virtual conference environment was very well accepted and very compelling. The MOH noted that opportunities for additional use of this type of conference have already been proposed. Next week Dr. Bezaud will make a presentation in Casablanca. Dr. Zarrari and M. Boulgana are already interested in this type of conference for training midwives.

Areas for improvement

- Pre-conference marketing requires more effort and preparation and is critical to the success of the Virtual Conference.
- Presenters need to be available on-line for large parts of the day.
- Quick meetings don’t allow all participants to be part of the discussion. There is need for a standardized method for capturing the results of these meetings.
- The conference is long (3 days) and could be shortened to 2 days.

To conclude, we have achieved our objectives: utilize the internet for a virtual conference and create a south to south exchange of ideas, share Morocco’s experience in developing safe motherhood programs, and explored new possibilities for the use of the technology in the future.